

**9 FAM PART IV Appendix N, Exhibit IV**  
**FORMAT FOR MONTHLY STATISTICAL REPORT**  
**TO INS OF ACTIONS TAKEN ON FORMS I-130**

DEPARTMENT OF STATE

TO: CHIEF, STATISTICAL ANALYSIS BRANCH,  
IMMIGRATION AND NATURALIZATION SERVICE,  
425 I STREET N. W., WASHINGTON, D.C. 20536

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SUBJECT: APPROVAL OF FORMS I-130 FOR THE MONTH  
OF \_\_\_\_\_ 19\_\_\_\_

TOTAL NUMBER OF Forms I-130 (immediate relative and preference  
petitions) approved during the month of \_\_\_\_\_.:\_\_\_\_\_.

For use, refer to 9 FAM PART IV Appendix N, 103 .

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